FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

SEC Mail Mail Processing Section

JIN 12 2008

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

14376	79
OMB APPRO	OVAL
OMB Number:	3235-0076
Expires:	
Estimated averag	e burden

hours per response.....16.00

SEC U	SE ONLY
Prefix	Serial
DATE F	ECEIVED
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#	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Regal Finance Barospy IRC Private Placement of Class A Shares of Common Stock	
Filing Under (Check 646) that apply): Rule 504 Rule 505 P Rule 506 Section 4(6) ULOE
Type of Filing:	PROCESSED
A. BASIC IDENTIFICATION DATA	F IUN 1.6 2008
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON REUTERS
Regal Financial Bancorp, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
925 Fourth Avenue, Suite 100, Seattle, WA 98104	(206) 621-0808
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	<u> </u>
Type of Business Organization	
•••	(please specif
business trust limited partnership, to be formed	
Month Year	08051604
	timated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta	
CN for Canada: FN for other foreign jurisdiction)	NA (A)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
 Each promoter of the issuer, if the issuer has been organized within the past five years; 										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	General and/or Managing Partner									
Full Name (Last name first, if individual) Tam, Jesse T.										
Business or Residence Address (Number and Street, City, State, Zip Code) 925 Fourth Avenue, Suite 100, Seattle, WA 98104	· · · · ·									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	ctor General and/or Managing Partner									
Full Name (Last name first, if individual) Foisie, Chuck										
Business or Residence Address (Number and Street, City, State, Zip Code) 925 Fourth Avenue, Suite 100, Seattle, WA 98104										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	ctor General and/or Managing Partner									
Full Name (Last name first, if individual) Greer, Micki C.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
925 Fourth Avenue, Suite 100, Seattle, WA 98104										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	etor General and/or Managing Partner									
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	General and/or Managing Partner									
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	ctor General and/or Managing Partner									
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	ctor General and/or Managing Partner									
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
(Use blank sheet, or copy and use additional copies of this sheet, as nece	essary)									

Г					B. 18	NFORMAT	ION ABOU	T OFFERI	NG				
1,	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes [No 🗷			
2.									s_50.	400.00			
3. 4.			permit join								irectly, any	Yes ⋉	No
,.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
Ful		Last name	first, if indi	ividual)									
		Residence	Address (N	lumber and	d Street, Ci	ity, State, Z	Lip Code)	•					· · · · · · · · · · · · · · · · · · ·
Nar	me of As	sociated Br	oker or De	aler									.
						=							
Sta			Listed Has " or check										1 States
	AL	AK	[AZ]	AR	CA	co	CT	DE	[DC]	FL	[GA]	ПП	ΠĎ
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH) WV	<u>(0K)</u> [W]	OR WY	PA PR
													<u> </u>
t ul	I Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nai	me of As:	sociated Br	oker or De	aler									
Sta			Listed Has										
	(Check	"All States	or check	individual	States)	***************************************							I States
	AL IL	AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE.	NV	NH	ИI	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)		,				
Nai	ne of Ass	sociated Br	oker or De	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)				***************************************	*******	····		l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	ĪĀ NV	KS NH	KŸ NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already		
	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box [7] and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	\$ 0.00
	Equity	5,000,000.00	\$ 0.00
	☑ Common ☐ Preferred		*
	Convertible Securities (including warrants)	c 0.00	0.00 \$
	Partnership Interests		s 0.00
	·		\$ 0.00
	Other (Specify)	5.000.000.00	· · · · · · · · · · · · · · · · · · ·
		.	3_0.50
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	0	<u>\$_0.00</u>
	Non-accredited Investors	0	\$ 0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		<u>\$_0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	Z	\$_25,000.00
	Accounting Fees	-	S
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		25,000.00

5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Pa	
each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Pa Affiliates Salaries and fees	975,000.00
Salaries and fees	
Purchase of real estate	ayments to Others
Purchase, rental or leasing and installation of machinery and equipment	
and equipment	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) \$\ \text{S} \\ Repayment of indebtedness \\ Working capital \\ Other (specify): Increase equity reserves for new loans \$\ \text{S} \\ Column Totals \\ Total Payments Listed (column totals added) \\ D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the information furnished by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written reque the information furnished by the issuer to any non-accredited investor purposant to paragraph (b)(2) of Rule 502. Signature Opate Date Date	
offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) \$\ \text{Repayment of indebtedness}\$\$ Repayment of indebtedness \$\ \text{S}\$\$ Working capital \$\ \text{S}\$\$ Other (specify): Increase equity reserves for new loans \$\ \text{S}\$\$ Column Totals \$\ \text{S}\$\$ Total Payments Listed (column totals added) \$\ \text{S}\$\$ D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the information furnished by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written reque the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature (Print or Type) Signature	
Working capital	
Other (specify): Increase equity reserves for new loans S Column Totals Total Payments Listed (column totals added) D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the information furnished by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written reque the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Signature Date	
Column Totals	
Column Totals	4,975,000.00
Total Payments Listed (column totals added)	
Total Payments Listed (column totals added)	4,975,000.00
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written reques the information furnished by the issuer to any non-accredited investor purposent to paragraph (b)(2) of Rule 502. Signature Signature	
signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written reque the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Signature Date	·
	the following st of its staff,
Name of Signer (Print or Type) Title of Signer (Print or Type)	
esse T. Tam President, Regal Financial Bancorp, Inc.	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE
1.		presently subject to any of the disqualification Yes No
	S	ee Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes t D (17 CFR 239.500) at such times as requ	o furnish to any state administrator of any state in which this notice is filed a notice on Form ired by state law.
3.	The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon written request, information furnished by the
4.	limited Offering Exemption (ULOE) of the	issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform state in which this notice is filed and understands that the issuer claiming the availability ishing that these conditions have been satisfied.
	uer has read this notification and knows the co thorized person.	ntents to be true and has duly caused this notice to be signed on its behalf by the undersigned
•	Print or Type) Financial Bancorp, Inc.	Signature Date 6 10 06
Vame (Print or Type)	Title (Print or Type)

President, Regal Financial Bancorp, Inc.

Instruction:

Jesse T. Tam

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 4 5 2 3 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell explanation of Type of investor and to non-accredited offering price waiver granted) offered in state amount purchased in State investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Amount State Yes No Investors Amount ΑL AK ΑZ AR $\mathsf{C}\mathsf{A}$ 0 X CO CT DE DC FL $\mathsf{G}\mathsf{A}$ HI 0 ID IL IN IA KS ΚY LA ME MD MA MI MN MS

APPENDIX 3 4 2 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell explanation of offering price Type of investor and to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Non-Accredited Accredited Investors Yes No Investors Amount Amount State Yes No MO MT NE NV 0 X NH NJ NM NY NC ND ОН OK OR PΑ RI SC SD TN TXUT VT VA0 WA X wv WI

	APPENDIX									
1		2	3 4 5 Disqualification							
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										